

AGN. NO.\_\_\_\_

MOTION BY SUPERVISOR MICHAEL D. ANTONOVICH      MAY 13, 2003

Harbor-UCLA, King/Drew-UCLA, LAC+USC, and Olive View-UCLA Medical Centers are the primary bases for resident physician training in the Department of Health Services (DHS). Attending (faculty) physicians who are fully trained experts in a specialty teach teams of resident physicians the art and science of patient care through bedside rounds, conferences, operating room supervision and other methods, depending on the specialty. These nationally regarded training programs are a crucial component of our disaster and emergency preparedness and are an important source of well-trained doctors for Los Angeles County.

Medicare has been a major source of funding for most American training programs since 1965. Through a complex formula, Federal funding is tied to the proportion of Medicare patients treated in a hospital.

- M O R E -

MOTION

MOLINA	_____
YAROSLAVSKY	_____
KNABE	_____
ANTONOVICH	_____
BURKE	_____

Hospitals with high numbers of Medicare patients usually receive the most support. DHS' teaching facilities have a small Medicare share (about 6%) and the greatest proportion of patients without any form of health insurance. Consequently, even though DHS trains approximately 1.6% of the nation's residents, it only receives about 0.2% of the Federal training funds (an eight-fold disparity). Viewed another way, the nation's average Medicare payment per resident per year is more than \$75,000, but DHS receives an average of less than \$15,000. Just receiving the national average payment would mean upwards to \$100 million more each year for DHS.

Recently, children's hospitals, which have essentially no Medicare patients, successfully achieved significant Federal funding for graduate medical education through the appropriations process. Unfortunately, because the appropriation process is an annual event, the budget allocation can vary widely and be disruptive to programs with a three to five-year training requirement. However, the strategy employed by the children's hospitals should be studied.

I, THEREFORE, MOVE that the Board direct the Department of Health Services to work with its teaching hospitals to develop a strategy to increase the Federal support for our graduate medical education programs and to report back to the Board within 30 days.

# # #